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Fill in this information to identify your cas	e:	
United States Bankruptcy Court for the: Northern District of New Yor	k	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Timothy First name Irving Middle name	Kathy First name Sue Middle name
	Bring your picture identification to your meeting with the trustee.	Monica Last name	Monica Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden	First name	First name
	names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
•	Only the last 4 digits of years		
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>6</u> <u>7</u> <u>0</u> <u>3</u>	xxx - xx - <u>4</u> <u>5</u> <u>2</u> <u>0</u>
	federal Individual Taxpayer Identification number	OR -	OR -
	(ITIN)	9xx - xx	9xx - xx

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		Timothy Kathy	Irving Monica Sue Monica		Case number (if known)			
First Name			Middle Name Last Name		Case Harriser (II NIOWI)			
			About Debtor 1:		About Del	otor 2 (Spouse Only in a Joint Case):		
Employer		ess names and dentification EIN) you have used 8 years	☐ I have not used any business names or EINs. Maple Valley Farms		☑I have not used any business names or EINs.			
		le names and doing	Business name		Business na	ame		
	business as names		Business name		Business na	ame		
			8 7 - 3 EIN	5 2 6 4 6 7	 EIN			
					<u> </u>			
5.	Where you	live			If Debtor 2	lives at a different address:		
			123 North Green Number Stre		Number	Street		
			Porter Corners. City	NY 12859-0000 State ZIP Code	City	State ZIP Code		
			Saratoga					
				ddress is different from the one above, e that the court will send any notices to g address.	it in here.	e's mailing address is different from yours, fill Note that the court will send any notices to you ling address.		
			Number Stre	eet	Number	Street		
			P.O. Box		P.O. Box			
			City	State ZIP Code	City	State ZIP Code		
6.		re choosing <i>this</i> ile for bankruptcy	Check one:		Check one) :		
	uistrict to i	ne for bankruptcy		180 days before filing this petition, I this district longer than in any other	Over to have I district	he last 180 days before filing this petition, I ived in this district longer than in any other t.		
			I have anothe (See 28 U.S.	er reason. Explain. C. § 1408)	I have (See 2	another reason. Explain. 28 U.S.C. § 1408)		

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	tor 1 tor 2	Timothy Kathy	Irving Sue	Monica Monica	•	
DOD	101 2	First Name	Middle Na		— Case nu	mber (if known)
Par	t 2: Tell t	he Court About Yo	ur Bankr	uptcy Case		
7.		er of the Bankruptcy are choosing to file	Bankrupt Ch. Ch.	ne. (For a brief description of each, see Notey (Form 2010)). Also, go to the top of pagapter 7 apter 11 apter 12 apter 13		
8.	How you v	vill pay the fee	detai chec a cre l nee to Pa l req judge offici choo	pay the entire fee when I file my petition. Is about how you may pay. Typically, if you k, or money order. If your attorney is submidit card or check with a pre-printed address of the pay the fee in installments. If you chear the Filing Fee in Installments (Official February The Filing Fee waived (You may require may, but is not required to, waive your fee all poverty line that applies to your family sise this option, you must fill out the Applicary and file it with your petition.	are paying the fee yourse itting your payment on yourse. sose this option, sign and form 103A). est this option only if youe, and may do so only if you are unable to	elf, you may pay with cash, cashier's ur behalf, your attorney may pay with attach the <i>Application for Individuals</i> are filing for Chapter 7. By law, a pur income is less than 150% of the pay the fee in installments). If you
9.		filed for bankruptcy last 8 years?		District Northern District of New York District Northern District of New York District	When 10/06/2015 MM / DD / YYYY When 10/06/2015 MM / DD / YYYY When MM / DD / YYYY	Case number 15-12018 Case number 15-12018 Case number
10.	pending or spouse wh case with	ankruptcy cases r being filed by a no is not filing this you, or by a partner, or by an		DistrictV	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11.	Do you rei	nt your residence?		Go to line 12. Has your landlord obtained an eviction judge. No. Go to line 12. Yes. Fill out <i>Initial Statement About a</i> as part of this bankruptcy petition.		nst You (Form 101A) and file it

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Debtor 1 Timothy Debtor 2 Kathy		Irving Sue	Monica Monica		Case number (if known)						
	First Name		Middle Name	Last Name		Case number (ii known)					
Par	t 3: Report A	bout Any Busin	iesses You	Own as a Sole Propriet	or						
12.	12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		No. Go	to Part 4. ame and location of business							
			Maple Name o 123 No Number								
			Hudso City	on Falls	NY State	12859 ZIP Code					
			Check the appropriate box to describe your business:								
			Health Care Business (as defined in 11 U.S.C. § 101(27A))								
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))								
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))								
			Commodity Broker (as defined in 11 U.S.C. § 101(6))								
			☑ None of the above								
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?			appropriate sheet, state	e deadlines. If you indicate that	t you are a small busines v statement, and federal in	ou are a small business debtor so s debtor, you must attach your m ncome tax return or if any of thes	ost recent balance				
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).		☑ No.	I am not filing under Chapte	r 11.						
			No. I am filing under Chapter 11, but I am NOT a small business debtor accordance Bankruptcy Code.				efinition in the				
			☐ Yes.			ebtor according to the definition inder Subchapter V of Chapter 11.	n the				
			☐ Yes.		oter 11, I am a small business debtor according to the definition in the d I choose to proceed under Subchapter V of Chapter 11.						

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Debtor 1 Debtor 2	Timothy Kathv	Irving Sue	Monica Monica		0	
20010. 2	First Name	Middle Name	Last Name		Case number (if know	n)
Part 4: Re	eport if You Own or Ha	ave Any Hazardo	ous Property or	Any Property That Need	ds Immediate Attent	tion
proper	u own or have any rty that poses or is d to pose a threat of	✓ No. ☐ Yes. What i	s the hazard?			
immin hazard safety	ent and identifiable I to public health or ? Or do you own any rty that needs immediate	lf imm	ediate attention is	needed, why is it needed?		
perisha that mu	ample, do you own able goods, or livestock ust be fed, or a building eeds urgent repairs?					
		Where	is the property?	Number Street		
				City	State	ZIP Code

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Debtor 1 Debtor 2 Timothy Kathy First Name Part 5: Explain Your Efforts to			Irving Monica Sue Monica				Case number (if known)			
		Middle Name Last Name Receive a Briefing About Credit Counseling			eling	Case number (if known)				
15.	Tell the court whether you have received a briefing about credit counseling.	Abo	out Debtor 1:		,	Abo	ut Debtor 2 (Spou	se Only in a Joint Case):		
The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file. If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can		You	agency within the petition, and I result a copy of that you develop	fing from an approved credit co ne 180 days before I filed this ba eccived a certificate of completion the certificate and the payment pled with the agency.	unseling nkruptcy on. olan, if any,	You	agency within the petition, and I reconstruction. Attach a copy of that you developed	ing from an approved credit counseling a 180 days before I filed this bankrupto beived a certificate of completion. The certificate and the payment plan, if and with the agency.	any,	
		J	agency within the petition, but I do Within 14 days a	fing from an approved credit co ne 180 days before I filed this ba not have a certificate of comple lifter you file this bankruptcy petiti	nkruptcy etion. on, you	_	agency within the petition, but I do Within 14 days af	ing from an approved credit counseline 180 days before I filed this bankrupton not have a certificate of completion. Iter you file this bankruptcy petition, you of the cartificate and powers place if the cartificate and powers place if the cartificate and powers place if the cartificate and powers place.	y I	
	begin collection activities again.		I certify that I as approved agend during the 7 day	y of the certificate and payment p ked for credit counseling servic cy, but was unable to obtain thos rs after I made my request, and o merit a 30-day temporary waiver	es from an se services exigent	I certify that I asked for credit counsel approved agency, but was unable to a during the 7 days after I made my requirement. To ask for a 30-day temporary waiver of attach a separate sheet explaining who obtain the briefing, why you were unable to be a separate sheet explaining who obtain the briefing, why you were unable to the separate sheet explaining who obtain the briefing, why you were unable to the separate sheet explaining who obtain the briefing.				
			attach a separate obtain the briefin	day temporary waiver of the requi e sheet explaining what efforts yong, why you were unable to obtain kruptcy, and what exigent circum ile this case.	ou made to n it before			sheet explaining what efforts you mad g, why you were unable to obtain it befor uptcy, and what exigent circumstances	e to ore	
			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.				Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.			
			receive a briefin You must file a c with a copy of th do not do so, yo	tisfied with your reasons, you mug within 30 days after you file. certificate from the approved age to payment plan you developed, our case may be dismissed.	ncy, along if any. If you	with a copy of the payment plan you de do not do so, your case may be dismiss and the solution of the 30-day deadline is cause and is limited to a maximum of 1.		g within 30 days after you file. ertificate from the approved agency, alc e payment plan you developed, if any. I ur case may be dismissed.	f you	
			cause and is lim	of the 30-day deadline is granted bited to a maximum of 15 days. d to receive a briefing about cre				ted to a maximum of 15 days. I to receive a briefing about credit		
			counseling beca	Ause of: I have a mental illness or a me deficiency that makes me incal realizing or making rational decapout finances.	pable of		counseling becau	use of: I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	f	
			Disability.	My physical disability causes nunable to participate in a briefin person, by phone, or through t internet, even after I reasonable so.	ng in he		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to so.		
			Active duty	y. I am currently on active military a military combat zone.	duty in		Active duty	I am currently on active military duty in a military combat zone.	1	
				ou are not required to receive a b inseling, you must file a motion fo g with the court.	•			u are not required to receive a briefing nseling, you must file a motion for waive with the court.	er of	

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Deb Deb	tor 1 tor 2	Timothy <u>Kathy</u>	Irving Sue	Monica Monica		Case n	umher	(if known)
		First Name	Middle N	ame Last Name		Gase II	umber	(II KIIOWII)
Par	t 6: Answe	r These Questic	ns for Re	eporting Purposes				
16.	16. What kind of debts do you have?		16a.			er debts? Consumer debts are de for a personal, family, or househo		
			16b.			s debts? Business debts are debt ough the operation of the busines		
			16c.	State the type of debts you ow	e th	at are not consumer debts or busi	iness d	lebts.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? No. I am not filing under Chapter 7. Go to line 18. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?								
18.	How many o	creditors do you at you owe?		1-49		25,001-50,000 50,000	0-100,0	000
19.	How much of assets to be	do you estimate yo worth?	our 🗆 💆	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much o	do you estimate yo be?	A	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Par	t 7: Sign B	elow						
Fo	r you	If I hav States If no a have c	ve chosen to Code. I ur ttorney repostained ar	to file under Chapter 7, I am aw inderstand the relief available un resents me and I did not pay on ad read the notice required by 1	/are nder r agi 1 U.	each chapter, and I choose to pro- ree to pay someone who is not an S.C. § 342(b).	der Cha oceed u attorn	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I
		king a false statement, conceali	ing p	property, or obtaining money or pro	operty	•		
		X	/s/ Timot	hy Irving Monica ving Monica, Debtor 1		/s/ Kathy Sue Mo Kathy Sue Monica,		ur 2
			•	on <u>05/05/2022</u> MM/ DD/ YYYY		Executed on 05/05		

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Debtor 1 Debtor 2	Timothy Kathy	Irving Sue	Monica Monica	
DODIO! Z	First Name	Middle Name	Last Name	Case number (if known)
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		proceed under Chapter 7, 11, 12, or 13 of title 11, Un each chapter for which the person is eligible. I also compared to the chapter for which the person is eligible.		nis petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under le. I also certify that I have delivered to the debtor(s) the notice required by § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /s/ Ronal	d I Kim	Date 05/05/2022
		<u> </u>	of Attorney for Debtor	MM / DD / YYYY
		Firm name	es of Ronald J. Kim, PC	
		Saratoga	Spgs	NY 12866-6212
		City		State ZIP Code
		Contact ph	none <u>(518) 581-8416</u>	Email address <u>ron@ronaldkimlaw.com</u>
		511156		NY
		Bar numbe	er	State

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Fill in this information	n to identify your case	and this filing:		
Debtor 1	Timothy	Irving	Monica	
	First Name	Middle Name	Last Name	
Debtor 2	Kathy	Sue	Monica	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankı	ruptcy Court for the:	No	rthern District of New Yor	<u> </u>
Case number				

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

 No. Go to Part 2. Yes. Where is the property? 123 North Greenfield Road	What is the property? Check all that apply.	Do not deduct secured clai		
Street address, if available, or other description	☑ Single-family home	amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
Porter Corners, NY 12859-0000 City State ZIP Code	 ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land 	Current value of the entire property?	Current value of the portion you own?	
Saratoga County	☐ Investment property ☐ Timeshare ☐ Other Who has an interest in the property? Check one.	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or life estate), if known.		
		Homestead		
	 □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another 	Check if this is come (see instructions)	munity property	
	Other information you wish to add about this iter property identification number:	·		
	Source of Value: Zillow			

Case 22-10427-1-rel Doc 1 Document Page 10 of 59 Irving Debtor 1 **Timothy** Debtor 2 Kathy Sue Monica Case number (if known). First Name Middle Name Last Name Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No **√** Yes Who has an interest in the property? Check one. 3.1 Make: Chevrolet Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Debtor 1 only **K3 Series** Who Have Claims Secured by Property. Model: Debtor 2 only Current value of the 1996 Current value of the Debtor 1 and Debtor 2 only Year: entire property? portion you own? At least one of the debtors and another 140,000 Approximate mileage: \$2,000.00 \$2,000.00 Check if this is community property Other information: (see instructions) If you own or have more than one, list here: 3.2 Make: Who has an interest in the property? Check one. Chevrolet Do not deduct secured claims or exemptions. Put the Debtor 1 only amount of any secured claims on Schedule D: Creditors **K2 Series** Who Have Claims Secured by Property. Model: Debtor 2 only 1996 Current value of the Current value of the Debtor 1 and Debtor 2 only Year: entire property? portion you own? At least one of the debtors and another 190,000 Approximate mileage: \$1,000.00 \$1,000.00 Other information: ☐ Check if this is community property (see instructions) 3.3 Make: Who has an interest in the property? Check one. Chevrolet Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Debtor 1 only Trailblazer Who Have Claims Secured by Property. Model: Debtor 2 only 2001 ☐ Debtor 1 and Debtor 2 only Current value of the Current value of the Year: entire property? portion you own? ☐ At least one of the debtors and another 100000 Approximate mileage: \$2,000.00 \$2,000.00 ☐ Check if this is community property Other information: (see instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **✓** No ☐ Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....

Official Form 106A/B

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Document Monica Debtor 1 Timothy Irving Debtor 2 Kathy Sue Monica Case number (if known) First Name Middle Name Last Name

Pai	t 3: Describe Your Personal and Household Items	
Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6	Household goods and furnishings	
0.	Examples: Major appliances, furniture, linens, china, kitchenware	
	□ No	ı
	Yes. Describe	\$5,000.00
		40,000.00
7	Electronics	
١.	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
	collections; electronic devices including cell phones, cameras, media players, games	
	□ No	
	Yes. Describe	\$2,000.00
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
	stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	☑ No	
	Yes. Describe	
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑ No	
	Yes. Describe	
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	☑ No	
	Yes. Describe	
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No	40.000.00
	Yes. Describe	\$2,000.00
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,	
	silver	
	✓ No ☐ Yes. Describe	
	Tes. Describe	

Case 22-10427-1-rel Doc 1 Page 12 of 59 Document Debtor 1 Timothy Irving Debtor 2 Kathy Sue Monica Case number (if known). First Name Middle Name Last Name 13. Non-farm animals Examples: Dogs, cats, birds, horses **√** No Yes. Describe...... 14. Any other personal and household items you did not already list, including any health aids you did not list Yes. Describe...... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here \$9,000.00 Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **√** No 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No **☑** Yes..... Institution name: **Hudson River Credit Union** \$21.23 17.1. Checking account: 17.2. Checking account: **Hudson River Credit Union** \$14.94 17.3. Savings account: **Hudson River Credit Union** \$635.50 17.4. Savings account: **Hudson River Credit Union** \$521.00

17.5. Certificates of deposit:

17.6. Other financial account:

17.7. Other financial account:

Case 22-10427-1-rel Doc 1 Page 13 of 59 Document Debtor 1 **Timothy** Irving Debtor 2 Kathy Sue Monica Case number (if known). First Name Middle Name Last Name 17.8. Other financial account: 17.9. Other financial account: Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **√** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **√** No Yes. Give specific information about them..... Name of entity: % of ownership: Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **√** No Yes. Give specific information about them..... Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: Pension plan: unknown Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **√** No

☐ Yes.....

Electric:

Institution name or individual:

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Debtor 1

Timothy

Irving

Kathy Debtor 2 Sue Monica Case number (if known). First Name Middle Name Last Name Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **✓** No ☐ Yes..... Issuer name and description: Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). **√** No ☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c): Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **✓** No Yes. Give specific information about them.... Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **√** No ☐ Yes. Give specific information about them....

Case 22-10427-1-rel Doc 1 Document Page 15 of 59 Debtor 1 **Timothy** Irving Debtor 2 Kathy Sue Monica Case number (if known). First Name Middle Name Last Name 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **√** No ☐ Yes. Give specific information about them.... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you **√** No Yes. Give specific information about Federal: them, including whether you State: already filed the returns and the tax years..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement **√** No ☐ Yes. Give specific information....... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☐ Yes. Give specific information........

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

√ No

☐ Yes. Name the insurance company of each policy and list its value....

Company name:

Beneficiary:

Surrender or refund value:

Case 22-10427-1-rel Doc 1 Page 16 of 59 Document Irving Debtor 1 **Timothy** Debtor 2 Kathy Sue Monica Case number (if known). First Name Middle Name Last Name 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. **√** No ☐ Yes. Give specific information........ 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue **✓** No ☐ Yes. Describe each claim..... Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **√** No ☐ Yes. Describe each claim..... 35. Any financial assets you did not already list ☐ Yes. Give specific information........ Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... \$1,442.67 Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? ☐ No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned **√** No ☐ Yes. Describe......

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

39. Office equipment, furnishings, and supplies

√ No

Yes. Describe......

Case 22-10427-1-rel Doc 1 Document Page 17 of 59 Debtor 1 **Timothy** Irving Debtor 2 Kathy Sue Monica Case number (if known). First Name Middle Name Last Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ Yes. Describe...... 41. Inventory **√** No ☐ Yes. Describe...... 42. Interests in partnerships or joint ventures **√** No ☐ Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations **✓** No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe...... 44. Any business-related property you did not already list No Yes. Give specific information..... Maple Valley Farm-The Monica Family LLC unknown Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here...... \$0.00 Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

Examples: Livestock, poultry, farm-raised fish

No
Yes......

Current value of the portion you own?
Do not deduct secured claims or exemptions.

✓ No. Go to Part 7.

☐ Yes. Go to line 47.

47. Farm animals

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Debtor 1

Timothy

Irving

Debt	tor 2	Kathy	Sue	Monica	Case number (if known)
		First Name	Middle Name	Last Name	
10	Crops sith	ner growing o	r harvootad		
40.	Crops—eiti	iei growing o	i ilaivesteu		
	√ No				
	Yes. Give	e specific			
		on			
49.	Farm and fis	shina eauipme	ent, implements, machine	erv. fixtures, and tool	s of trade
-		3 - 1 - 1	. , р ,	3 ,	
	☑ No				
	☐ Yes				
50.	Farm and fis	shing supplies	s, chemicals, and feed		
	√ No				
	Yes				
	☐ Yes				
-4	A 6		-1 (! -1: !:- : : : -1 - (: : ! :: : : : : : : : : : : : : : :		P-4
51.	Any tarm- a	na commercia	al fishing-related property	you did not aiready	list
	√ No				
	Yes. Give	e specific			
		on			
52.					ries for pages you have attached
	for Part 6. W	rite that numi	ber nere		→ \$0.00
Par	t 7: Descri	ibe All Prop	erty You Own or Have	e an Interest in T	nat You Did Not List Above
					
53.	Do you have	e other proper	ty of any kind you did no	t already list?	
	Examples:	Season tickets	s, country club membershi	ip	
	√ No				
	Yes. Give	o opocifio			
		on			
	morrian	011			
54.	Add the dol	lar value of all	of your entries from Part	t 7. Write that numbe	here→ \$0.00
Par	t 8: List th	e Totals of	Each Part of this For	m	
	2.01 1.1				
55.	Part 1: Total	real estate, li	ne 2		→ \$320,000.00
					Ψ320,000.00
56.	Part 2: Total	vehicles, line	5		\$5,000.00
57.	Part 3: Total	personal and	I household items, line 15	i	\$9,000.00
			,		
E0	Dart 4. Tatal	financial ca-	ote line 26		\$1 442 67
58.	rant 4: Iotal	financial ass	eis, iiile 30		\$1,442.67
59.	Part 5: Total	business-rela	ated property, line 45		\$0.00

Filed 05/06/22 Entered 05/06/22 11:49:14 Desc Main Case 22-10427-1-rel Doc 1 Document Monica Page 19 of 59 Debtor 1 Timothy Irving Debtor 2 Kathy Sue Monica Case number (if known). First Name Middle Name Last Name Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61..... \$15,442.67 Copy personal property total→ \$15,442.67 \$335,442.67 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

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Debtor 1	Timothy	Irving	Monica			
Debtor 2	Kathy	Sue	Monica	Case number (if known)		
	First Name	Middle Name	Last Name			

SCHEDULE A/B: PROPERTY

Continuation Page

17.	Deposits of money	
	Checking account: Hudson River Credit Union	\$250.00

Official Form 106A/B Schedule A/B: Property

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Fill in this information	n to identify your case	:			
Debtor 1	Timothy	Irving	Monica		
	First Name	Middle Name	Last Name		
Debtor 2	Kathy	Sue	Monica		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bank	ruptcy Court for the:	No	thern District of New York		
Case number					☐ Check if this
(if known)					amended fili

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as	Exempt							
 Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. 								
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption					
Brief description: 123 North Greenfield Road Porter Corners, NY 12859-0000 Line from Schedule A/B: 1.1	\$320,000.00	\$1.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)					
Brief description: 1996 Chevrolet K3 Series Line from Schedule A/B: 3.1	\$2,000.00	\$2,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)					
3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) ✓ No ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No ☐ Yes								

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Debtor 1	Timothy	Irving	Monica	
Debtor 2	Kathy	Sue	Monica	Case number (if known)
	First Name	Middle Name	Last Name	

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:		1 \$1,000.00	11 U.S.C. § 522(d)(5)
1996 Chevrolet K2 Series	\$1,000.00	100% of fair market value, up	11 0.0.0. § 322(d)(0)
Line from Schedule A/B: 3.2		to any applicable statutory limit	
Brief description:		\$2,000,00	44 11 0 0 0 5 500(1)(0)
2001 Chevrolet Trailblazer	\$2,000.00	Ψ2,000.00	11 U.S.C. § 522(d)(2)
Line from Schedule A/B: 3.3		□ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$5,000.00	44 11 0 0 0 500(1)(0)
Household goods	\$5,000.00		11 U.S.C. § 522(d)(3)
Line from		☐ 100% of fair market value, up to any applicable statutory limit	
Schedule A/B: 6		, , , , , , ,	
Brief description:		\$2,000,00	
Electronics	\$2,000.00		11 U.S.C. § 522(d)(3)
Line from Schedule A/B:7		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		□6	
Clothes	\$2,000.00	\$2,000.00	11 U.S.C. § 522(d)(3)
Line from		☐ 100% of fair market value, up to any applicable statutory limit	
Schedule A/B: 11		,,,	
Brief description:		√ \$21.23	
Hudson River Credit Union	\$21.23		11 U.S.C. § 522(d)(5)
Checking account		☐ 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 17		to any approach charactery mine	
Brief description:		☑ \$635.50	44 11 0 0 0 5 500(4)/5)
Hudson River Credit Union	\$635.50		11 U.S.C. § 522(d)(5)
Savings account		□ 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 17			
Brief description:		⊴ \$14.94	11 U.S.C. § 522(d)(5)
Hudson River Credit Union	\$14.94	100% of fair market value, up	11 0.3.0. § 322(0)(3)
Checking account		to any applicable statutory limit	
Line from Schedule A/B: 17			

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Debtor 1 Debtor 2 Part 2: Add	Timothy Kathy First Name	Irving Sue Middle Name	Monica Monica Last Name	Case numbe	er (if known)	
	tion of the property an 3 that lists this propert		Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption	
Brief descripti Hudson Rive Savings accou Line from Schedule A/E	er Credit Union Int		\$521.00	\$521.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Brief descripti Hudson Rive Checking acco Line from Schedule A/E	er Credit Union ount		\$250.00	\$250.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)	
Brief description Retirement and Line from Schedule A/E	ccount		unknown	 ✓ unknown 100% of fair market value, up to any applicable statutory limit 	11 U.S.C. § 522(d)(12)	
Brief descripti	ion: Farm-The Monica Fan	nily LLC	unknown	unknown	11 U.S.C. § 522(d)(5)	

100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B:

44

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				Document	Page 24 of 59			
Fill	in this information to	o identify your case:						
De	ebtor 1	Timothy First Name	Irving Middle Name	Monica Last Name				
_	ebtor 2 pouse, if filing)	Kathy First Name	Sue Middle Name	Monica Last Name				
Un	ited States Bankrup	otcy Court for the:	N	Iorthern District of N	lew York			
	se number known)						Check if amended	
Off	icial Form	106D						
Sc	hedule D	: Creditors	s Who I	Have Clair	ms Secured	d by Prope	erty	12/15
case 1. Do	number (if known) any creditors have No. Check this bo	e claims secured by a and submit this form e information below.	your property	?	attach it to this form.	, ,		e your name and
2.	separately for each	aims. If a creditor hand claim. If more than As much as possible	one creditor ha	as a particular claim,	list the other	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	SN Servicing Corporation SN Servicing Corporation SN Servicing Corporation SN Servicing SN Servi	t State ZIP Code	123 No. 12859-0	date you file, the claingent	Porter Corners, NY	\$394,308.24	\$320,000.00	<u>\$74,308.24</u>
	☑ Debtor 1 and De	ebtor 2 only	Nature o	f lien. Check all that	apply.			

☐ Statutory lien (such as tax lien, mechanic's

Last 4 digits of account number 0 3 5 7

or secured car loan)

Add the dollar value of your entries in Column A on this page. Write that number here:

☐ Judgment lien from a lawsuit

Other (including a right to offset)

 $\square_{\mbox{At least one of the debtors and}}$

☐ Check if this claim relates to a

another

community debt

Date debt was incurred

\$394,308.24

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Debtor 1 Debtor 2	Timothy Kathy First Name	Irving Sue Middle Name	e Monica		Case number (if known)			
Part 1:	Additional Page After listing any e 2.3, followed by 2		e, number them begin	ning with	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.2 Creditor's	Name Street		e the property that secure e date you file, the claim is:				_	
Debto	es the debt? Check o	ZIP Code apply.	ingent juidated	O leok all that				
Debto	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		of lien. Check all that apply greement you made (such cured car loan)	as mortgage				
comn	k if this claim relates nunity debt ot was incurred	lien)	ntory lien (such as tax lien, ment lien from a lawsuit r (including a right to offse					
Add the	dollar value of your		ligits of account number . n this page. Write that nu			50.00		
If this is	the last page of your	form, add the dollar	value totals from all pages	s. Write that number	er \$394,30	08.24		

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Debtor 1 Debtor 2	Timothy <u>Kathy</u> First Name	Irving Sue Middle Name	Mon Mon Last		Case number (if known)
Part 2: Lis	st Others to Be No	otified for a Debt Th	nat You <i>i</i>	Already List	ed
trying to coll	ect from you for a de	bt you owe to someon ebts that you listed in l	e else, lis	t the creditor i	a debt that you already listed in Part 1. For example, if a collection agency is n Part 1, and then list the collection agency here. Similarly, if you have more l creditors here. If you do not have additional persons to be notified for any
1 Dovle I	Esq., James G.				On which line in Part 1 did you enter the creditor?
Name					Last 4 digits of account number 1 7 2 6
<u>175 Ch</u>	nurch Street				
Number	Street				
Sarato	ga Springs, NY 12866	3			_
City		S	tate	ZIP Code	
2 Friedm	an Vartolo LLP				On which line in Part 1 did you enter the creditor?1
Name					Last 4 digits of account number
	ranklin Avenue 160				
Number	Street				
ATTN:	Juliana Thibaut				_
Garder	n City, NY 11530				
City		S	tate	ZIP Code	_

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			Document Page 27 of 59			
Fill in this informatio	n to identify your case	:				
Debtor 1	Timothy First Name	Irving Middle Name	Monica Last Name			
Debtor 2	Kathy	Sue	Monica			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bank	cruptcy Court for the:	No	orthern District of New York			
Case number	, ,				Check if thi	is is an
(if known)				•	amended fi	
Official Form	n 106E/F					
		ore Who	Have Unsecured Claims			4045
			editors with PRIORITY claims and Part 2 for creditor			12/15
106A/B) and on <i>Sche</i> are listed in <i>Schedul</i> the boxes on the left.	edule G: Executory Co le D: Creditors Who H	ontracts and Une. Iold Claims Secur tion Page to this	could result in a claim. Also list executory contracts expired Leases (Official Form 106G). Do not include red by Property. If more space is needed, copy the lapage. On the top of any additional pages, write you nims	any creditors wi Part you need, fi	th partially sec Il it out, numbe	cured claims that er the entries in
	rs have priority unsec					
No. Go to F		arca olamis agai	not you.			
fill out the Conti	inuation Page of Part 1	 If more than one 	petical order according to the creditor's name. If you he creditor holds a particular claim, list the other credituctions for this form in the instruction booklet.)		Priority amount	Nonpriority amount
2.1 Saratoga Sp	orings City School Dis	strict	Last 4 digits of account number	\$2,788.9	\$2,788.99	\$0.00
Priority Creditor	's Name		When was the debt incurred?			
Acct Ending	0357		A (1) 1 (1) (1) (1)			
Po Box 378 Number	Street		As of the date you file, the claim is: Check all tha apply.	t		
	orings, NY 12866-0000		Contingent			
City	State	ZIP Code	☐ Unliquidated			
Debtor 1	d the debt? Check one only	}.	Disputed			
Debtor 2	•		Type of PRIORITY unsecured claim: ☐ Domestic support obligations			
Debtor 1	and Debtor 2 only		✓ Taxes and certain other debts you owe the			
	ne of the debtors and		government Claims for death or personal injury while you			
	this claim is for a com ubject to offset?	imunity debt	were intoxicated			
✓ No	abject to onset:		☐ Other. Specify			
☐ Yes						
2.2 Town Of Gre	eenfield Tax Collector	r	Last 4 digits of account number	\$1,445.1	<u>\$1,445.15</u>	\$0.00
Priority Creditor	's Name		When was the debt incurred?			
Acct Ending	0859					
Po Box 10 Number	Street		As of the date you file, the claim is: Check all tha apply.	t		
Greenfld Ctr	, NY 12833-0010		Contingent			
City	State	ZIP Code	Unliquidated			
Who incurred Debtor 1	the debt? Check one	;.	☐ Disputed			
Debtor 2			Type of PRIORITY unsecured claim: Domestic support obligations			
	and Debtor 2 only		☐ Domestic support obligations ☐ Taxes and certain other debts you owe the			

lacksquare At least one of the debtors and another

lacksquare Check if this claim is for a community debt

Claims for death or personal injury while you

government

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Debtor 1 Debtor 2 Part 2: List	Timothy Kathy First Name	Irving Sue Middle Name RIORITY Unsecure	Monica Monica Last Name	Case number (if known)
3. Do any cre No. Yo Yes. 4. List all of y	ditors have nonprior u have nothing to rep our nonpriority unse	rity unsecured claims ort in this part. Submit ecured claims in the a	against you? this form to the court with your other s	holds each claim. If a creditor has more than one nonpriority
1. If more t				at type of claim it is. Do not list claims already included in Part ave more than three nonpriority unsecured claims fill out the Total claim
Nonpriority Acct En PO Box Number Waterto City	Street wn, NY 13601	State ZIP Code	Last 4 digits of account When was the debt incu As of the date you file, th Contingent Unliquidated Disputed Type of NONPRIORITY to	rred?he claim is: Check all that apply.
Debt Debt At lea	or 1 only or 2 only or 1 and Debtor 2 onl ast one of the debtors ok if this claim is for a im subject to offset?	s and another a community debt	Student loans Obligations arising o divorce that you did	ut of a separation agreement or not report as priority claims profit-sharing plans, and other

☐ Yes

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Debtor 1 Debtor 2	Timothy Kathy	Irving Sue	Monica Monica			Case number (if I	known)
	First Name	Middle Name	Last Name				
Part 4: Add th	he Amounts fo	r Each Type of Uns	secured Claim				
	nounts of certain to		aims. This informat	ion is fo	r sta	tistical reporting purposes only. 28	U.S.C. §159. Add the amounts
						Total claim	
Total claims	6a. Domestic s ı	upport obligations		6a.		\$0.00	
from Part 1	6b. Taxes and c government	ertain other debts you	u owe the	6b.		\$4,234.14	
	6c. Claims for d	leath or personal injur cated	y while you	6c.		\$0.00	
	6d. Other. Add a Write that ar	all other priority unsecu mount here.	ured claims.	6d.	+	\$0.00	
	6e. Total. Add li	nes 6a through 6d.		6e.		\$4,234.14	
						Total claim	
Total claims	6f. Student loar	ns		6f.		\$0.00	
from Part 2		arising out of a separ or divorce that you did laims		6g.		\$0.00	
	6h. Debts to perother simila	nsion or profit-sharing r debts	g plans, and	6h.		\$0.00	
		Il other nonpriority uns that amount here.	ecured	6i.	+	\$446.95	1
	6j. Total. Add lin	nes 6f through 6i.		6j.		\$446.95	

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Fill in this information	n to identify your case	:		
Debtor 1	Timothy	Irving	Monica	
	First Name	Middle Name	Last Name	
Debtor 2	_ Kathy	Sue	Monica	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	No	rthern District of New Yor	<u> </u>
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whom y	you hav	ve the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City	S	State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City	S	State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City	S	State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City	S	State	ZIP Code	

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Fill	in this information	to identify your ca	ase:				
De	ebtor 1	Timothy	Irving	Monica			
		First Name	Middle Name	Last Name			
	ebtor 2	Kathy	Sue	Monica			
(Sp	oouse, if filing)	First Name	Middle Name	Last Name			
Ur	nited States Bankr	uptcy Court for the	e: <u>No</u>	orthern District of New Yo	ork		
	ase number						Check if this is an
(if I	known)						amended filing
∩ff	ficial Form	106H					
Sc	:hedule F	1: Your C	odebtors				12/15
in the	e boxes on the lef y question. Do you have ar	t. Attach the Add	itional Page to this		Additional Pages, w	rite your name and case n	t out, and number the entries number (if known). Answer
	☑ No						
_	Yes	_					
2.	Idaho, Louisian	a, Nevada, New N		nity property state or terri , Texas, Washington, and		property states and territoric	es include Arizona, California,
	✓ No. Go to lin						
	•	ir spouse, former	spouse, or legal equ	uivalent live with you at the	e time?		
	□ No □ Ves In w	hich community s	tate or territory did y	vou live?	F	ill in the name and current	address of that person
	ies. III w	Their community s	tate of territory did y	you live:	·	iii iii the hame and current	address of that person.
	Name						
	Number	Street					
	City		State ZIP Cod	de			
3.	again as a code	ebtor only if that p	oerson is a guarant	or or cosigner. Make sur	e you have listed the	e is filing with you. List the e creditor on <i>Schedule D</i> (dule E/F, or Schedule G to	Official Form 106D),
	Column 1: Your o	odebtor			Colu	mn 2: The creditor to who	m you owe the debt
					Ch	eck all schedules that appl	ly:
3.1						Schedule D, line	
	Name					Schodulo E/E lino	

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

Number

City

Street

State

ZIP Code

☐ Schedule E/F, line ______

Schedule G, line _____

Case 22-10427-1-rel Doc 1 Filed 05/06/22 Entered 05/06/22 11:49:14 Desc Main Document Page 32 of 59

Debtor 1 Timothy Inviting Monica First Name Missis Name Last Name Class and Supplement status Groundle I: Your Income 12/15 Schedule I: Your Income 12/15						- 9						
First Name Modde Name Last Name Debtor 2 Northern Modde Name Last Name	Fil	in this information to id	entify your c	ase:								
First Name Modde Name Last Name Debtor 2 Northern Modde Name Last Name	ח	ebtor 1 T	imothv	Irvina	Monica	_						
Check this is: United States Bankruptcy Court for the: Northern District of New York An amended filing A supplement showing postpetition chapter 13 income as of the following date (fixower) An amended filing An aupplement showing postpetition chapter 13 income as of the following date (fixower) An amended filing An aupplement showing postpetition chapter 13 income as of the following date (fixower) An amended filing An aupplement showing postpetition chapter 13 income as of the following date (fixower) An amended filing An aupplement showing postpetition chapter 13 income as of the following date (fixower) An amended filing An aupplement showing postpetition An aupplement should postpetition An aupplement should postpetition An aupplement sh	_											
United States Bankruptcy Court for the: Case number (it hown)	D	ebtor 2 K	athy	Sue	Monica							
Case number (if known) Official Form 106 Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correctormation. If you are married and not filing jointly, and your spouse is twing with you, include information about your spouse. If you are separated and you spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate spage with information about variety space. If you go the space is needed, attach a separate sheet to this form. On the top of any information about additional employers. Include part time, seasonal, or self-employed work. Cocupation Employer's address Cocineth, NY 12822 City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City State Zip Code City City City City City City City City	(8								Check	if this is:		
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	3.	Estimate and list mon	thly overtim	ве рау.		3.	+	\$0.00	+	\$0.00		
4. Calculate gross income. Add line 2 + line 3. 4. \$4,463.21 \$0.00	4	Calculate gross incor	ne . Add line	2 + line 3		4		\$4,463.21		\$0.00		

Case 22-10427-1-rel Doc 1 Filed 05/06/22 Entered 05/06/22 11:49:14 Desc Main Document Page 33 of 59 Timothy Monica Debtor 1 Irving Debtor 2 Kathy Sue Monica Case number (if known). First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse \$4,463.21 Copy line 4 here.....→ 4. \$0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions \$0.00 \$0.00 5a. 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00

	5d. Required repayments of retirement fund loans	5d.	_	\$0.00		\$0.0	0	
	5e. Insurance	5e.	_	\$0.00		\$0.0	0	
	5f. Domestic support obligations	5f.	_	\$0.00		\$0.0	0_	
	5g. Union dues	5g.	_	\$0.00		\$0.0	<u>0</u>	
	5h. Other deductions. Specify:	5h.	+	\$0.00	+	\$0.0	<u>(O</u>	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	_	\$0.00		\$0.0	0_	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	_	\$4,463.21		\$0.0	<u>0</u>	
8.	List all other income regularly received:							
	8a. Net income from rental property and from operating a business, profession, or farm							
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	_	\$459.00		\$0.0	<u>0</u>	
	8b. Interest and dividends	8b.		\$0.00		\$0.0	0_	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive							
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	_	\$0.00		\$0.0	<u>0</u>	
	8d. Unemployment compensation	8d.	_	\$0.00		\$0.0	0	
	8e. Social Security	8e.	_	\$0.00		\$1,167.0	<u>0</u>	
	8f. Other government assistance that you regularly receive							
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
	Specify:	8f.	_	\$0.00		\$0.0	0_	
	8g. Pension or retirement income	8g.	_	\$0.00		\$0.0	<u>0</u>	
	8h. Other monthly income. Specify:	8h.	+	\$0.00	+	\$0.0	0	
					1 _		\neg	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	<u>L</u>	\$459.00		\$1,167.0	<u>)O</u>	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.		\$4,922.21]+[\$1,167.0	<u>oo</u>]=	\$6,089.21
11.	State all other regular contributions to the expenses that you list in Scheo	dule J.						
	Include contributions from an unmarried partner, members of your househol friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a	, ,	•	.,		,		
	Specify:						11. +	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistical			,	incom	ne. Write that	12.	\$6,089.21
	and and a second and			ppoo				Combined
40	Down and the instance of the state of the st							monthly income
13.	Do you expect an increase or decrease within the year after you file this fo	orm?						

√ No.		
Official Form 1061	Schedule I: Your Income	page 2

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 Debtor 1
 Timothy
 Irving
 Monica

 Debtor 2
 Kathy
 Sue
 Monica
 Case number (if known)

 First Name
 Middle Name
 Last Name

Business Income Bart A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: \$6,060.00 Bold
FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: 1. Gross Monthly Income: \$6,060.00 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: 2. Ordinary and necessary expense \$0.00 3. Net Employee Payroll (Other than debtor) \$0.00 4. Payroll Taxes \$0.00 5. Unemployment Taxes \$0.00 6. Worker's Compensation \$0.00 7. Other Taxes \$0.00 8. Inventory Purchases (Including raw materials) \$0.00 9. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: \$6,060.00 1. Gross Monthly Income: \$6,060.00 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: 2. Ordinary and necessary expense \$0.00 3. Net Employee Payroll (Other than debtor) \$0.00 4. Payroll Taxes \$0.00 5. Unemployment Taxes \$0.00 6. Worker's Compensation \$0.00 7. Other Taxes \$0.00 8. Inventory Purchases (Including raw materials) \$0.00 9. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: \$6,060.00 1. Gross Monthly Income: \$6,060.00 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: \$0.00 2. Ordinary and necessary expense \$0.00 3. Net Employee Payroll (Other than debtor) \$0.00 4. Payroll Taxes \$0.00 5. Unemployment Taxes \$0.00 6. Worker's Compensation \$0.00 7. Other Taxes \$0.00 8. Inventory Purchases (Including raw materials) \$0.00 9. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: \$0.00 2. Ordinary and necessary expense \$0.00 3. Net Employee Payroll (Other than debtor) \$0.00 4. Payroll Taxes \$0.00 5. Unemployment Taxes \$0.00 6. Worker's Compensation \$0.00 7. Other Taxes \$0.00 8. Inventory Purchases (Including raw materials) \$0.00 9. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
2. Ordinary and necessary expense \$0.00 3. Net Employee Payroll (Other than debtor) \$0.00 4. Payroll Taxes \$0.00 5. Unemployment Taxes \$0.00 6. Worker's Compensation \$0.00 7. Other Taxes \$0.00 8. Inventory Purchases (Including raw materials) \$0.00 9. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
3. Net Employee Payroll (Other than debtor) \$0.00 4. Payroll Taxes \$0.00 5. Unemployment Taxes \$0.00 6. Worker's Compensation \$0.00 7. Other Taxes \$0.00 8. Inventory Purchases (Including raw materials) \$0.00 9. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
4. Payroll Taxes \$0.00 5. Unemployment Taxes \$0.00 6. Worker's Compensation \$0.00 7. Other Taxes \$0.00 8. Inventory Purchases (Including raw materials) \$0.00 9. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
5. Unemployment Taxes \$0.00 6. Worker's Compensation \$0.00 7. Other Taxes \$0.00 8. Inventory Purchases (Including raw materials) \$0.00 9. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
6. Worker's Compensation 7. Other Taxes 8. Inventory Purchases (Including raw materials) 9. Purchase of Feed/Fertilizer/Seed/Spray 10. Rent (Other than debtor's principal residence) 11. Utilities 12. Office Expenses and Supplies \$0.00 \$5,601.00
7. Other Taxes \$0.00 8. Inventory Purchases (Including raw materials) \$0.00 9. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
8. Inventory Purchases (Including raw materials) \$0.00 9. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
9. Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
11. Utilities \$0.00 12. Office Expenses and Supplies \$5,601.00
12. Office Expenses and Supplies \$5,601.00
13. Repairs and Maintenance \$0.00
14. Vehicle Expenses\$0.00
15. Travel and Entertainment \$0.00
16. Equipment Rental and Leases \$0.00
17. Legal/Accounting/Other Professional Fees \$0.00
18. Insurance \$0.00
19. Employee Benefits (e.g., pension, medical, etc.) \$0.00
 Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts
TOTAL PAYMENTS TO SECURED CREDITORS\$0.00
21. Other Expenses
TOTAL OTHER EXPENSES \$0.00
\$5,601.00 \$5,601.00
22. TOTAL MONTHLY EXPENSES(Add item 2 - 21) PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:
23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) \$459.00

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				Jocument					
Fil	I in this information	to identify your case	9:						
D	ebtor 1	Timothy	Irving	Monica					
		First Name	Middle Name	Last Name		Check if this is:			
	Debtor 2	Kathy	Sue	Monica		An amended	-		
(5	Spouse, if filing)	First Name	Middle Name	Last Name		A supplement	t showing postp		
U	Inited States Bankru	ptcy Court for the:	Nor	thern District o	of New York	chapter 13 in	Joine as of the	Tollowing date.	
_	case number f known)					MM / DD / YY	YY		
`									
Of	fficial Form	106J							
So	chedule J	: Your Ex	penses						12/15
					ogether, both are equally re				
			this form. On the to	op of any addit	tional pages, write your nar	ne and case numl	oer (if known).	Answer every qu	uestion.
Pa	art 1: Describe	our Household							
1.	Is this a joint case	?							
	No. Go to line 2								
	Yes. Does Deb	tor 2 live in a sepa	rate household?						
	✓ No	Dahtan O must fila C	#:a:a! Farma 400 L 0		Separate Household of Del	-40			
2				, Expenses for	Separate Household of Del	OTOF 2.			
۷.	Do you have depe		✓ No		Dependent's relationship	to Depen	dent's Do	es dependent liv	/e
	Debtor 2.	T dila	Yes. Fill out this for each depen		Debtor 1 or Debtor 2	age		th you?	
	Do not state the donames.	ependents'						No. Yes.	
					-			No. ☐ Yes.	
							_	□ No. □ Yes.	
								No. ☐ Yes.	
								No. Yes.	
3.	Do your expenses expenses of peop		√ No						
	yourself and your		Yes						
Pa	art 2: Estimate	Your Ongoing M	onthly Expense	S					
					using this form as a supple eck the box at the top of the				s of a
	Clude expenses pai	-							
	ch assistance and		-	-			Your expe	enses	
4.			ses for your resid	ence. Include f	irst mortgage payments and	any rent 4.		\$1,600.00	
	for the ground or le	Ot.				٦,	-	Ψ1,000.00	
	If not included in	line 4:							
	4a. Real estate tax	xes				4a.		\$450.00	
	4b. Property, home	eowner's, or renter's	s insurance			4b.		\$150.00	
	4c. Home mainten	ance, repair, and u	okeep expenses			4c.		\$300.00	

4d. Homeowner's association or condominium dues

4d.

\$0.00

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 Debtor 1
 Timothy
 Irving
 Monica

 Debtor 2
 Kathy
 Sue
 Monica
 Case number (if known)

 First Name
 Middle Name
 Last Name

	Yo	ur expenses
Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
5. Utilities:		
6a. Electricity, heat, natural gas	6a. —	\$500.00
6b. Water, sewer, garbage collection	6b	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$300.00
6d. Other. Specify:	6d	\$0.00
. Food and housekeeping supplies	7.	\$1,000.00
. Childcare and children's education costs	8.	\$0.00
. Clothing, laundry, and dry cleaning	9.	\$150.00
0. Personal care products and services	10.	\$50.00
Medical and dental expenses	11.	\$200.00
Transportation. Include gas, maintenance, bus or train fare.Do not include car payments.	12.	\$500.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
4. Charitable contributions and religious donations	14.	\$20.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a. —	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$300.00
15d. Other insurance. Specify:	15d	\$0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.Specify:	16.	\$0.00
· ,		
7. Installment or lease payments:	17a.	\$0.00
17a. Car payments for Vehicle 1	17b.	\$0.00
17b. Car payments for Vehicle 2	17c.	\$0.00
17c. Other. Specify:	17d.	
17d. Other. Specify:	17u.	\$0.00
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18	\$0.00
9. Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	е.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Deb Deb	tor 1 tor 2	Timothy Kathy First Name	Irving Sue Middle Name	Monica Monica Last Name	Case numbe	r (if known)
21.	Other. Spec	ify:			21.	+\$0.00
22.	Calculate yo	our monthly expe	enses.			
	22a. Add line	es 4 through 21.			22a.	\$5,620.00
	22b. Copy li	ne 22 (monthly ex	xpenses for Debtor 2),	if any, from Official Form 106J-2	22b.	\$0.00
	22c. Add line	e 22a and 22b. Th	ne result is your month	ly expenses.	22c.	\$5,620.00
23.	Calculate yo	our monthly net i	ncome.			
	23a. Copy li	ne 12 (your comb	ined monthly income)	from Schedule I.	23a.	\$6,089.21
	23b. Copy y	our monthly expe	nses from line 22c abo	ove.	23b.	- \$5,620.00
		ct your monthly ex	kpenses from your moi ly net income.	nthly income.	23c.	\$469.21
24.	For example mortgage pa	e, do you expect to	o finish paying for you	penses within the year after you fire car loan within the year or do you e of a modification to the terms of y	expect your	

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Fill in this information	n to identify your case:			
Debtor 1	Timothy	Irving	Monica	
	First Name	Middle Name	Last Name	_
Debtor 2	Kathy	Sue	Monica	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	Nor	thern District of New	York
Case number (if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

new Summary and check the box at the top of this page.	-
Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$320,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$15,442.67
1c. Copy line 63, Total of all property on Schedule A/B	\$335,442.67
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$394,308.24
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$4,234.14
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$446.95
Your total liabilities	\$398,989.33
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$6,089.21
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$5,620.00

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Debtor 1 Debtor 2		Timothy	Irving Sue	Monica Monica	0 1	
Debioi 2		Kathy First Name	Middle Name	Last Name	Case number (if known)
Part 4:	Answer	These Ques	tions for Administr	ative and Statistical Records		
-	_		nder Chapters 7, 11, or			
☐ No ☐ Yes		e nothing to rep	oort on this part of the fo	orm. Check this box and submit this form to t	he court with your other sched	dules.
Y Yes	S					
7 What k	ind of dob	ot do you have	2			
√ You	ur debts a	are primarily co	nsumer debts. Consur	mer debts are those "incurred by an individua	al primarily for a personal,	
fan	nily, or hou	usehold purpose	e." 11 U.S.C. § 101(8). I	Fill out lines 8-9g for statistical purposes. 28	U.S.C. § 159.	
☐ You this	ur debts a s form to th	are not primaril he court with yo	y consumer debts. You our other schedules.	have nothing to report on this part of the fo	rm. Check this box and submit	t
				Copy your total current monthly income from	n Official	\$4,707,26
Form 1	22A-1 Line	e 11; OR , Form	n 122B Line 11; OR , For	m 1220-1 Line 14.		
O. Copy tl	he followi	ng special cate	egories of claims from	Part 4, line 6 of Schedule E/F:		
					Total claim	
Fron	n Part 4 o	n Schedule E/F	F, copy the following:			
			(0 " 0)		***	
9a. D	omestic si	upport obligatio	ons (Copy line 6a.)		\$0.00	
Ob To	avec and a	aartain athar da	ebts you owe the govern	amont (Conviling Ch.)	\$4.224.44	
90. 16	axes and c	certain other de	bis you owe the govern	ппент. (Сору ште об.)	\$4,234.14	
9c. Cl	laims for d	death or person	al iniury while you were	e intoxicated. (Copy line 6c.)	\$0.00	
			,	(
9d. St	tudent loa	ns. (Copy line 6	6f.)		\$0.00	
			separation agreement	or divorce that you did not report as priority	\$0.00	
cla	aims. (Cop	by line 6g.)				
Of De	ahts to ner	nsion or profit-s	sharing plans, and other	similar debts. (Copy line 6h.)	.	
JI. DE	one to her	ision of profit-s	manny piano, and other	Similar debits. (Copy IIIIe Off.)	+ \$0.00	1
0~ T -	otal Add B	inas Qa thrauch	o Of		¢4 224 44	
ag. 10	Jiai. Aud I	ines 9a through	ı 3 ı.		\$4,234.14	

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Fill in this information	to identify your case			
Debtor 1	Timothy	Irving	Monica	
	First Name	Middle Name	Last Name	
Debtor 2	Kathy	Sue	Monica	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	Nor	thern District of New York	<u> </u>
Case number (if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an atte	orney to help you fill out bankruptcy forms?
☑No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
We clare that I have read the surface of the surfa	/s/ Kathy Sue Monica Kathy Sue Monica, Debtor 2 Date 05/05/2022 MM/ DD/ YYYY

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Fill in this information	n to identify your case	:		
Debtor 1	_ Timothy	Irving	Monica	
	First Name	Middle Name	Last Name	
Debtor 2	Kathy	Sue	Monica	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	Nor	rthern District of New Yo	rk
Case number				
(if known)				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

What is your current r	narital status?				
Married					
☐ Not married					
Ouring the last 3 years	s, have you lived anywhe	re other than where you li	ve now?		
√ No					
Yes. List all of the p	laces you lived in the last	3 years. Do not include when	nere you live now.		
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
			☐ Same as Debtor 1		☐ Same as Debtor 1
		From			From
umber Street		To	Number Street		
		_			_
City	State ZIP Code	_	City	State ZIP Code	_
			Same as Debtor 1		Same as Debtor 1
		_ From			_ From
umber Street		To	Number Street		To
iity	State ZIP Code	_	City	State ZIP Code	_
Vithin the last 8 years	s, did you ever live with a a, California, Idaho, Louisi	spouse or legal equivaler ana, Nevada, New Mexico	nt in a community property , Puerto Rico, Texas, Wash	state or territory?(Com	munity property states ar
1 No			,	,	
Yes. Make sure voi	ı fill out <i>Schedule H: Your</i>	Codebtors (Official Form 1	106H)		

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ebtor 1 ebtor 2	Kathy Su		Monica Monica		Case number (if know	/n)
		ddle Name	Last Name			
art 2: Ex	xplain the Sources of Y	our Inco	ime			
Fill in the to f you are fi	have any income from empotal amount of income you realling a joint case and you ha	eceived fro	m all jobs and all busin	esses, including part-time a		ears?
		De	ebtor 1		Debtor 2	
		So	ources of income	Gross Income	Sources of income	Gross Income
			neck all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	nuary 1 of current year unti filed for bankruptcy:		Wages, commissions, bonuses, tips Operating a business	\$16,968.00 \$697.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
	calendar year: 1 to December 31, 2021		Wages, commissions, bonuses, tips	\$51,893.00	☐ Wages, commissions, bonuses, tips	
(January	YYYY YYYY		Operating a business	\$0.00	Operating a business	
	calendar year before that: 1 to December 31, 2020		Wages, commissions, bonuses, tips	\$62,596.00	☐ Wages, commissions, bonuses, tips	
(•αα)	YYYY		Operating a business		Operating a business	
iclude incoublic bene ing a joint		hat income tal income	e is taxable. Examples on the contract of the	of other income are alimony oney collected from lawsuits	r; child support; Social Secu s; royalties; and gambling an	
	i iii iii di detaile.	De	ebtor 1		Debtor 2	
		So	ources of income escribe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)
	nuary 1 of current year unti filed for bankruptcy:	I the			Social Security	\$5,835.00
For last of	calendar year:					
	1 to December 31, <u>2021</u> YYYY	_)				
For the c	calendar year before that:					
(January	1 to December 31, <u>2020</u> YYYY	_)				

	Case	22-1042		Docum		Entered ge 43 of 5	l 05/06/22 1 59	11:49:14	Desc Main
ebtor 1 ebtor 2	Timos Kathy	•	Irving Sue	Monica Monica			Case r	number (if kno	wn)
	First N	ame	Middle Name	Last Name	9				,
Part 3: L	ist Certa	in Paymen	ts You Made	Before You File	d for Bankrı	uptcy			
6. Are eith	ner Debtor 1	's or Debtor	2's debts prima	arily consumer deb	ts?				
☐ No.				rimarily consumer family, or househol		mer debts are	defined in 11 U.S	S.C. § 101(8) a	as "incurred by
	During th	ie 90 days be	efore you filed for	or bankruptcy, did y	ou pay any cre	editor a total of	\$7,575* or more	?	
	☐ No. G	o to line 7.							
	☐ Yes.	paid that cre	editor. Do not ir	whom you paid a to nclude payments for n attorney for this ba	domestic sup	port obligation			
	* Subject	to adjustmer	nt on 4/01/25 a	nd every 3 years aft	ter that for case	es filed on or a	after the date of a	adjustment.	
√ Yes.	Debtor 1	or Debtor 2	or both have p	rimarily consumer	debts.				
			_	or bankruptcy, did y		editor a total of	\$600 or more?		
	√ No. G	o to line 7.							
	☐ Yes.	include pay		whom you paid a to estic support obligat ptcy case.					
				Dates of payment	Total amo	ount paid	Amount you s	still owe V	Vas this payment for
									Mortgage
	Creditor's N	ame		_	_				Car
		<u> </u>		_	_				Credit card
	Number	Street			_				Loan repayment
				_					Suppliers or vendors
	City	Sta	ate ZIP Code	_					Other
<i>Insider</i> s ir you are ar	nclude your n officer, dir	relatives; any ector, person	general partners in control, or c		general partner re of their votin	ers; partnershi ng securities; a	ps of which you a and any managin	are a general g agent, inclu	partner; corporations of which ding one for a business you nony.
☐ Yes.	List all pay	ments to an i	nsider.						
				Dates of payment	Total amour	nt paid Amo owe	unt you still	Reason for	this payment
Insider's	Name								
Number	Street								
City		State	ZIP Code						

		Irving	Monica				
	Timothy Kathy	Sue	Monica		Case	number (if know	/n)
	First Name	Middle Nar	me Last Nam	е			
Within 1 year	before you file	ad for bankrunt	ecy did you make any	navments or transfer	any property on acc	ount of a debt t	hat benefited an inside
			igned by an insider.	payments or transier	any property on acc	ount of a debt t	nat benemed an maide
☑ No							
Yes. List a	II payments that	t benefited an i	nsider.				
			Dates of	Total amount paid	Amount you still	Reason for	this payment
			payment		owe	Include cred	tor's name
Insider's Name							
Number Str	eet		_				
City	State	ZIP Code	_				
City	State	ZIF Code					
. Within 1 year ist all such ma ontract dispute	before you file	ed for bankrupt		n any lawsuit, court a			r custody modifications
. Within 1 year	before you file tters, including a s.	ed for bankrupt	cy, were you a party i	n any lawsuit, court a			
. Within 1 year ist all such ma ontract dispute	before you file tters, including a s.	ed for bankrupt personal injury	cy, were you a party i	n any lawsuit, court a ctions, divorces, collec			
. Within 1 year ist all such ma ontract dispute	before you file tters, including is. the details.	ed for bankrupt personal injury	ccy, were you a party i cases, small claims a	n any lawsuit, court a ctions, divorces, collections	tion suits, paternity ad	ctions, support o	Status of the case
. Within 1 year ist all such ma ontract dispute ☐ No ☑ Yes. Fill in	before you file tters, including as. the details.	ed for bankrupt personal injury nk National ny vs.	ccy, were you a party is cases, small claims and cases.	n any lawsuit, court a ctions, divorces, collections	irt or agency toga County Supreme	ctions, support o	r custody modifications
. Within 1 year ist all such ma ontract dispute ☐ No ☑ Yes. Fill in	before you file tters, including is. the details. Deutsche Ban Trust Compan	ed for bankrupt personal injury nk National ny vs.	ccy, were you a party is cases, small claims and cases.	n any lawsuit, court a ctions, divorces, collections Court Sara Court 30 M	irt or agency	ctions, support o	Status of the case
. Within 1 year ist all such ma ontract dispute ☐ No ☑ Yes. Fill in	the details. Deutsche Ban Trust Compan Timothy and k	ed for bankrupt personal injury nk National ny vs.	ccy, were you a party is cases, small claims and cases.	n any lawsuit, court a ctions, divorces, collect Court Sara Court 30 M	irt or agency toga County Supremental	e Court	Status of the case Pending On appeal

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						ige 45 of 59	06/22 13		
or 1 or 2	Timothy		Irving Sue	Moi	nica nica	ige +3 01 33	0	wal an are	
)	Kathy First Name		Middle Name		Name		Case nu	imber (if known)
				De	escribe the propert	y	D	ate	Value of the property
				_					
reditor's N	ame								
umber	Street			Ex	plain what happen	ed			
					Property was repos	sessed.			
					Property was forecl	osed.			
				_ 🔲	Property was garnis	shed.			
ity		State	ZIP Code		Property was attach	ned, seized, or levied.			
1 No ☑Yes. Fi	II in the details.			Describe the	he action the credi	tor took		e action was	Amount
reditor's N	ame			-			take	en	
				-					
umber	Street								
	Circoi								
		State	ZIP Code	Last 4 digits	of account number	r: XXXX			
Within 1 cointed re		ou filed fo	or bankruptcy	, was any of y		e possession of an a		the benefit of	f creditors, a court-
Within 1 pointed ro ✓ No ☐ Yes	year before yo eceiver, a custo	ou filed fo	or bankruptcy another offic	, was any of y ial?				the benefit of	f creditors, a court-
Within 1 pointed re ☑ No ☐ Yes t 5: Lis	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-
Within 1 pointed red No Yes t 5: Lis	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th		ssignee for		f creditors, a court-
Within 1 pointed roll No Yes t 5: Lis Within 2	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-
Within 1 pointed roll No Yes t 5: Lis Within 2	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-
Within 1 pointed roll No Yes t 5: Lis Within 2	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-
Within 1 pointed related No Yes The State of	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-
. Within 1 pointed related No Yes Tt 5: Lis . Within 2	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-
. Within 1 pointed related No Yes Tt 5: Lis . Within 2	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-
. Within 1 pointed related No Yes Tt 5: Lis . Within 2	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-
. Within 1 pointed related No Yes Tt 5: Lis . Within 2	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-
Within 1 pointed related No Yes The State of	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-
Within 1 pointed red No Yes 1 5: Lis Within 2	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-
Within 1 pointed red No Yes 1 5: Lis Within 2	year before yo eceiver, a custo st Certain Gif	ou filed foodian, or	or bankruptcy another office Contribution	y, was any of y ial?	your property in th	e possession of an a	ssignee for		f creditors, a court-

Doc 1 Filed 05/06/22 Entered 05/06/22 11:49:14 Desc Main Case 22-10427-1-rel Page 46 of 59 Document Monica Debtor 1 **Timothy** Irving Debtor 2 Monica **Kathy** Sue Case number (if known) First Name Middle Name Last Name Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street City ZIP Code State Person's relationship to you -14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **✓** No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Number Street City State ZIP Code List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **✓** No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your loss Value of property lost how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

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	ving Jue	Monica Monica		Case number (if kno	wn)
First Name N	liddle Name	Last Name			,
t 7: List Certain Payments	or Transfers				
. Within 1 year before you filed for out seeking bankruptcy or prepar clude any attorneys, bankruptcy per	ng a bankruptcy	petition?			to anyone you consulted
✓ Yes. Fill in the details.					
Law Offices of Ronald J. Kim. PC	Description	and value of any property t	ransferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	Attorney's Fe	е			
3257 Route 9 Ste 5 Number Street				4/12/2022	\$1,687.00
Saratoga Spgs, NY 12866-6212 City State ZIP Co	de				
ron@ronaldkimlaw.com Email or website address					
Person Who Made the Payment, if Not Y	ou				
☑ No ☐ Yes. Fill in the details.					
Caree. Tim in the details.	Description	and value of any property t	ransferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid					
Number Street					
					_
City State ZIP Co.	de				
			transfer any prop	erty to anyone, other t	aan proporty transforred in
		you sell, trade, or otherwise	transier any prop	,,,	ian property transferred in
linary course of your business or lude both outright transfers and tra not include gifts and transfers that	financial affairs? nsfers made as se	ecurity (such as the granting			
dinary course of your business or clude both outright transfers and tra not include gifts and transfers that	financial affairs? nsfers made as se	ecurity (such as the granting			
. Within 2 years before you filed for dinary course of your business or clude both outright transfers and trap on not include gifts and transfers that various of the course of the cour	financial affairs? nsfers made as se	ecurity (such as the granting			
dinary course of your business or clude both outright transfers and transfers that o not include gifts and transfers that 1 No	financial affairs? nsfers made as se	ecurity (such as the granting			
dinary course of your business or clude both outright transfers and transfers that not include gifts and transfers that ✓ No	financial affairs? nsfers made as se	ecurity (such as the granting			

btor 1 btor 2	Timothy		Monica			
101 2	Kathy	Irving Sue	Monica		Case number (if known)	
	First Name	Middle I				
			Description and value of prop transferred	Perty Describe any propreceived or debts p		Date transfer was made
Person Who F	Received Transfer					
Number S	Street					
City	State ZII	P Code				
•	ationship to you					
√ No	en called asset-pro	lection de	vices.)			
			Description and value of the m	ronarty transferred	ı	Date transfer was
			Description and value of the p	roperty transferred		made
			Description and value of the p	roperty transferred		made
Name of tru	st		Description and value of the p	operty transferred		made
						made
D. Within 1 yor transferred clude checkinds, coopera	Certain Financi ear before you filed 1? ing, savings, mone atives, associations	al Accou	ruptcy, were any financial according to the financial according to the financial institutions.	eposit Boxes, and Storage	e Units	it, closed, sold, mo
D. Within 1 yor transferred clude checkinds, coopera	Certain Financi ear before you filed 1? ing, savings, mone	al Accou	unts, Instruments, Safe De ruptcy, were any financial acco or other financial accounts; certion or financial institutions.	eposit Boxes, and Storage nunts or instruments held in your	e Units our name, or for your benefinks, credit unions, brokerage	it, closed, sold, mo
D. Within 1 your transferred clude checkinds, cooperated No	Certain Financi ear before you filed 1? ing, savings, mone atives, associations	al Accou	unts, Instruments, Safe Do ruptcy, were any financial acco or other financial accounts; certi	eposit Boxes, and Storage nunts or instruments held in your	Date account was closed, sold, moved, or	it, closed, sold, more houses, pension Last balance before closing or
List Within 1 ye transferred checkinds, coopera Value No	Certain Financi ear before you filed 1? ing, savings, money atives, associations in the details.	al Accou	unts, Instruments, Safe De ruptcy, were any financial acco or other financial accounts; certion or financial institutions.	eposit Boxes, and Storage nunts or instruments held in your ficates of deposit; shares in barries are type of account or	e Units our name, or for your benefinks, credit unions, brokerage	it, closed, sold, mo e houses, pension Last balance
List Within 1 yetransferred checkinds, coopera You have a real way and the coopera with t	Certain Financi ear before you filed 1? ing, savings, mone atives, associations	al Accou	unts, Instruments, Safe De ruptcy, were any financial acco or other financial accounts; certion or financial institutions.	eposit Boxes, and Storage nunts or instruments held in your ficates of deposit; shares in bar over Type of account or instrument Checking	Date account was closed, sold, moved, or	it, closed, sold, mo e houses, pension Last balance before closing or
List Within 1 ye transferred clude checkinds, coopera You No Yes. Fill i	Certain Financi ear before you filed 1? ing, savings, money atives, associations in the details.	al Accou	unts, Instruments, Safe Doruptcy, were any financial accounts; certion of the financial institutions. Last 4 digits of account numbers.	eposit Boxes, and Storage runts or instruments held in your ficates of deposit; shares in bar for Type of account or instrument Checking Savings	Date account was closed, sold, moved, or	it, closed, sold, mo e houses, pension Last balance before closing or
List Within 1 ye transferred clude checkinds, coopera You No Yes. Fill i	Certain Financi ear before you filed !? ing, savings, mone atives, associations in the details.	al Accou	unts, Instruments, Safe Doruptcy, were any financial accounts; certion of the financial institutions. Last 4 digits of account numbers.	eposit Boxes, and Storage nunts or instruments held in your ficates of deposit; shares in bar over Type of account or instrument Checking	Date account was closed, sold, moved, or	it, closed, sold, more houses, pension Last balance before closing or
D. Within 1 your transferred clude checkinds, cooperated No	Certain Financi ear before you filed !? ing, savings, mone atives, associations in the details.	al Accou	unts, Instruments, Safe Doruptcy, were any financial accounts; certion of the financial institutions. Last 4 digits of account numbers.	eposit Boxes, and Storage runts or instruments held in your ficates of deposit; shares in bar for Type of account or instrument Checking Savings Money market	Date account was closed, sold, moved, or	it, closed, sold, more houses, pension Last balance before closing or

Case 22-10427-1-rel Doc 1 Filed 05/06/22 Entered 05/06/22 11:49:14 Desc Main

Doc 1 Filed 05/06/22 Entered 05/06/22 11:49:14 Desc Main Case 22-10427-1-rel Page 49 of 59 Document Monica Debtor 1 **Timothy** Irving Debtor 2 Monica Kathy Sue Case number (if known). First Name Middle Name Last Name Who else had access to it? Describe the contents Do you still have it? □No Name of Financial Institution Name ☐ Yes Number Street Number Street City State **ZIP Code** City **ZIP Code** State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? **✓** No Yes. Fill in the details. Do you still have Who else has or had access to it? Describe the contents it? ☐ No Name of Storage Facility Name ☐ Yes Number Street Number Street **ZIP Code** City State City State **ZIP Code** Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Value Describe the property Owner's Name Number Street Street Number City State **ZIP Code** City State **ZIP Code**

Doc 1 Filed 05/06/22 Entered 05/06/22 11:49:14 Desc Main Case 22-10427-1-rel Page 50 of 59 Document Monica Irving Debtor 1 Timothy Debtor 2 **Kathy** Sue Monica Case number (if known). First Name Middle Name Last Name Give Details About Environmental Information Part 10: For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. ■ Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. ■ Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **√** No Yes. Fill in the details. Governmental unit Date of notice Environmental law, if you know it Name of site Governmental unit Number Street Number Street City State **ZIP Code** City State **ZIP Code** 25. Have you notified any governmental unit of any release of hazardous material? **✓** No Yes. Fill in the details. Date of notice Governmental unit Environmental law, if you know it Name of site Governmental unit Number Number Street Street City State **ZIP Code** City State **ZIP Code** 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **✓** No Yes. Fill in the details.

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ebtor 1 ebtor 2	Timothy Kathy	Irving Sue		Monica Monica		.go 01 01 01		(15)	
PEDIOI Z	First Name	Middle N	Name	Last Name	;		Case number	(if known)	
			Court or ag	ency		Nature of the	case		Status of the case
Case title									Donding
ouse title			Court Name						☐ Pending ☐ On appeal
			Nob.c. Ct	4					☐ Concluded
			Number St	reet					
Case numb	er		City	State 2	ZIP Code				
David 11 C	in Detelle Alexa	.t. \/ D	!	.					
Part III: G	ive Details Abou	it Your Bu	isiness or (Connection	ns to Any B	usiness			
27. Within 4	years before you fi	iled for banl	kruptcy, did y	ou own a b	usiness or ha	ve any of the fo	llowing connections t	to any busin	ess?
	sole proprietor or se					-		•	
	member of a limited				-		or part time		
_			прапу (ССС)	or illilited ilai	onity partifiers	iip (LLP)			
	partner in a partners								
	officer, director, or								
☐ An	owner of at least 5	% of the vo	ting or equity	securities of	f a corporation	1			
☐ No. No	ne of the above app	olies. Go to	Part 12.						
√ Yes. Ch	neck all that apply a	bove and fil	I in the details	s below for e	each business				
Manla Val	ley Farms		Describe the nature of the business			•	Employer Identificat		
Name	iey raiiiis						Do not include Socia	al Security n	number or ITIN.
123 North	Breenfield Road						EIN: <u>8 7 – 3</u>	5 2 6	4 6 7
Number	Street								
			Name of a	ccountant o	r bookkeeper		Dates business exis	ted	
Hudson F	alls, NY 12859						From	_ To	
City		ZIP Code							
creditors, or ✓ No	years before you fi other parties. I in the details below		kruptcy, did y	you give a fi	nancial stater	nent to anyone	about your business?	? Include all	financial institutions,
			Date issue	ed					
			MM / DD / YY						
Name			IVIIVI / UU / T T						
Number	Street								
HUITIDEF	Olicei								
City	State 2	ZIP Code							

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Monica

Debtor 1

Timothy

☐ Yes. Name of person -

Irving

Debtor 2	Kathy	Sue	Monica	Case number (if known)
	First Name	Middle Name	Last Name	
Part 12: Si	gn Below			
				nd I declare under penalty of perjury that the answers are true
				ning money or property by fraud in connection with a , or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
barna aproy	odoo odii roodii iir iii	100 up 10 4200,000, 0	inpriorimone for up to 20 yours	, 5. 554.1. 10 0.010.133 102, 1011, 1010, 4.14 001 11
X /s/ Ti	mothy Irving Monica		X /s/ Kathy Sue Mo	nica
	ture of Timothy Irving	Monica, Debtor 1		Sue Monica, Debtor 2
Date _	05/05/2022	_	Date <u>05/05/2022</u>	
•	ch additional pages	to your Statement of F	inancial Affairs for Individuals F	Filing for Bankruptcy (Official Form 107)?
√ No				
Yes				
Did you pay	or agree to pay son	neone who is not an att	orney to help you fill out bankru	uptcy forms?
√ No				

Attach the Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of New York

In re	N	Monica, Timothy II	rving						
	N	Monica, Kathy Sue	Э		C	Case No			
Debto	r				C	Chapter	13	<u></u>	
			DISCLOSURE	OF COMPENS	ATION OF ATT	TORNEY F	OR DEBTO	DR	
1.	con	npensation paid to	me within one yea	, , ,	the petition in ban	kruptcy, or ag	reed to be pa	named debtor(s) and that id to me, for services rendered is as follows:	t
	For	legal services, I h	nave agreed to acce	ept			<u> </u>	\$5,000.00	
	Pric	or to the filing of th	is statement I have	received			<u> </u>	\$1,687.00	
	Bala	ance Due					<u> </u>	\$3,313.00	
2.	The	e source of the co	mpensation paid to	me was:					
	4	Debtor	Other (specify	')					
3.	The	e source of compe	ensation to be paid t	to me is:					
	✓	Debtor	Other (specify	')					
4.		I have not agree	d to share the above	e-disclosed compens	sation with any oth	ner person ur	nless they are	members and associates of m	у
		_		sclosed compensation	•	-		ot members or associates of mation, is attached.	у
5.	In re	eturn for the abov	e-disclosed fee, I ha	ave agreed to rende	r legal service for	all aspects of	the bankrupto	cy case, including:	
	a.	Analysis of the bankruptcy;	debtor' s financial si	ituation, and renderir	ng advice to the de	ebtor in deter	mining whethe	er to file a petition in	
	b.	Preparation and	filing of any petition	n, schedules, statem	nents of affairs and	d plan which i	may be require	ed;	
	C.	Representation	of the debtor at the	meeting of creditors	and confirmation	hearing, and	any adjourne	d hearings thereof;	
6	By :	agreement with th	e debtor(s) the abo	ove-disclosed fee do	es not include the	following ser	vices.		

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B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/05/2022 /s/ Ronald J Kim

Date Ronald J Kim

Signature of Attorney

Bar Number: 511156 Law Offices of Ronald J. Kim, PC 3257 Route 9 Ste 5

Saratoga Spgs, NY 12866-6212 Phone: (518) 581-8416

. (0.10) 00.

Law Offices of Ronald J. Kim, PC

Name of law firm

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Fill in this information	to identify your case:			
Debtor 1	Timothy	Irving	Monica	_
	First Name	Middle Name	Last Name	_
Debtor 2	Kathy	Sue	Monica	_
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:	Nor	thern District of New York	_
Case number (if known)				

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
✓ 3. The commitment period is 3 years.
\square 4. The commitment period is 5 years.
Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

			Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
Your gross wages, salary, tips, bonuses, overtime, an payroll deductions).	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).					
3. Alimony and maintenance payments. Do not include p	payments from a spous	se.	\$0.00	\$0.00		
4. All amounts from any source which are regularly paid your dependents, including child support. Include regunmarried partner, members of your household, your do roommates. Do not include payments from a spouse. Do on line 3.	\$0.00	\$0.00				
5. Net income from operating a business, profession, or farm	Debtor 1	Debtor 2				
Gross receipts (before all deductions)	\$1,619.67	\$0.00				
Ordinary and necessary operating expenses	- \$1,430.00 -	\$0.00				
Net monthly income from a business, profession, or fan	m \$189.67	\$0.00 Cop		\$0.00		
6. Net income from rental and other real property	Debtor 1	Debtor 2				
Gross receipts (before all deductions)	\$0.00	\$0.00				
Ordinary and necessary operating expenses	- \$0.00 -	\$0.00				
Net monthly income from rental or other real property	\$0.00	\$0.00 Cop		\$0.00		

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Monica

Debtor 2	Kathy	Sue	Monica		_ Case	e number (if known)		
	First Name	Middle Name	Last Name		Column A Debtor 1	Column B Debtor 2 o non-filing	=	
7. Interest, c	dividends, and royal	ties			\$0.0		\$0.00	
8. Unemploy	yment compensatio	n			\$0.0	 00	\$0.00	
Do not en	ter the amount if you	contend that the amou	int received was a bene	fit under	<u></u>	<u> </u>	<u> </u>	
the Social	Security Act. Instea	d, list it here:						
For yo	ou		······································	\$0.00				
For yo	our spouse			\$1,167.00				
under the include an States Go death of a under cha exceed th	Social Security Act. ny compensation, per evernment in connect member of the uniful peter 61 of title 10, the e amount of retired per	Also, except as stated nsion, pay, annuity, or a tion with a disability, coormed services. If you ren include that pay only	mount received that was in the next sentence, do allowance paid by the Unmbat-related injury or disectived any retired pay to the extent that it do otherwise be entitled if if that title.	o not nited sability, or paid es not	<u>\$0.</u>	00	\$0.00	
not include a victim of terrorism States G death of	de any benefits rece of a war crime, a crir i; or compensation, p overnment in conne	ived under the Social S ne against humanity, or pension, pay, annuity, or ction with a disability, co formed services. If nece	ecify the source and am ecurity Act; payments re international or domest allowance paid by the ombat-related injury or d essary, list other sources	eceived as tic United disability, or				
								
Total amo	unts from separate p	pages, if any.			+	_ +		
11. Calculate	e your total average	monthly income. Add	lines 2 through 10 for ea	ach	\$4,707.2	<u>+</u>	\$0.00	= \$4,707.26
		or Column A to the total	<u> </u>					Total average
								monthly income
Part 2: Det	ermine How to N	Measure Your Dedu	ctions from Income	;				
12. Copy yo	ur total average mo	nthly income from line	11					\$4,707.26
12 Coloulate	e the marital adjustr	ment Chack and						
_	•							
_	not married. Fill in 0							
	-	pouse is filing with you.						
Fill in th	e amount of the inco		ou. lumn B, that was NOT r tax liability or the spouse					
Below,			and the amount of incom	ne devoted to	each purpose. If ne	ecessary, list		
	djustment does not a	· · · · ·						
				+				
Total					\$0.00	Copy here. $ ightarrow$		\$0.00
14 Your cur	rent monthly incom	e. Subtract the total in I	ine 13 from line 12					\$4,707.26
1-7. Tour cur	. S. A. III S. III III II	S. Sabilact the total III I	110 10 HOIH IIIIO 12.					Ψ1,101.20

Debtor 1

Timothy

Irving

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Debtor 1 Debtor 2	Timothy <u>Kathy</u>	Irving Sue	Monica Monica	Case number (if known)	
	First Name	Middle Name	Last Name		
	-		ear. Follow these steps:		\$4,707.26
		the number of month			x 12
15h Th	e result is your curre	ant monthly income fo	or the year for this part of	the form	\$56,487.12
100. 111	o result to your ourre	THE MOUNTAIN MOONIE TO	in the year for this part of		
	the median family in the state in which		to you. Follow these step	os: New York	
		· ·		2	
IOD. FIII	in the number of pe	ople in your househo			
	•	•			\$80,784.00
			nounts, go online using the available at the bankrup	e link specified in the separate tcy clerk's office.	
17. How do t	he lines compare?				
17a. 🔽	Line 15b is less th U.S.C. § 1325(b)	nan or equal to line 16	Sc. On the top of page 1 on NOT fill out <i>Calculation of</i>	of this form, check box 1, <i>Disposable income is not deter</i> f Your Disposable Income (Official Form 122C–2).	rmined under 11
17b. 🖵	1325(b)(3). Go to		alculation of Your Dispos	a, check box 2, <i>Disposable income is determined under a</i> sable Income (Official Form 122C-2). On line 39 of that the sable Income (Official Form 122C-2) are the sable Income (Official Form 122C-2).	
Part 3: Cald	culate Your Com	mitment Period L	Jnder 11 U.S.C. §132	5(b)(4)	
18. Copy yo	ur total average mo	nthly income from lir	ne 11		\$4,707.26
calculatin amount f	ng the commitment per rom line 13.	period under 11 U.S.C	C. § 1325(b)(4) allows you	e is not filing with you, and you contend that to deduct part of your spouse's income, copy the	
19a. If the	marital adjustment	does not apply, fill in	0 on line 19a		- \$0.00
19b. Subt	ract line 19a from li	ne 18.			\$4,707.26
20. Calculate	your current mont	hly income for the ye	ear. Follow these steps.		
20a. Copy	line 19b				\$4,707.26
Multip	ly by 12 (the numbe	r of months in a year).		x 12
20b. The re	esult is your current i	monthly income for th	ne year for this part of the	form.	\$56,487.12
20c. Copy t	the median family in	come for your state a	and size of household from	n line 16c	\$80,784.00
21. How do t	he lines compare?				
Line 20	b is less than line 2 mmitment period is	0c. Unless otherwise 3 <i>years.</i> Go to Part 4	ordered by the court, on	the top of page 1 of this form, check box 3,	
Line 20	b is more than or ed	-	ss otherwise ordered by t	he court, on the top of page 1 of this form,	
Part 4: Sign	n Below				
By signing	here, under penalty	of perjury I declare t	that the information on thi	s statement and in any attachments is true and correct.	
X /s	/ Timothy Irving M	onica		X /s/ Kathy Sue Monica	
· · · —	gnature of Debtor 1	J		Signature of Debtor 2	
Da	te <u>05/05/2022</u> MM/ DD/ YYYY			Date 05/05/2022 MM/ DD/ YYYY	
		II out or file Form 122 m 122C–2 and file it		of that form, copy your current monthly income from line	e 14 above.

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IN THE UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF NEW YORK ALBANY DIVISION

IN RE: Monica, Timothy Irving Monica, Kathy Sue

CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

The a	above named Debto	r hereby verifies that the attac	ched list of creditors is true and correct to the best of his/her knowledge.	edge.
Date _	05/05/2022	Signature	/s/ Timothy Irving Monica Timothy Irving Monica, Debtor	_
Date	05/05/2022	Signature	/s/ Kathy Sue Monica Kathy Sue Monica, Joint Debtor	_

Central Service Bureau, Inc. Acct Ending N/A PO Box 251 Watertown, NY 13601

James G. Doyle, Esq. Acct No 0357 175 Church Street Saratoga Springs, NY 12866

Friedman Vartolo LLP Acct No 0357 ATTN: Juliana Thibaut 1325 Franklin Avenue 160 Garden City, NY 11530

Saratoga Springs City School District Acct Ending 0357 Po Box 378 Saratoga Springs, NY 12866-0000

SN Servicing Corporation Acct No 0357 323 5th Street Eureka, CA 95501

Town Of Greenfield Tax Collector Acct Ending 0859 Po Box 10 Greenfld Ctr, NY 12833-0010